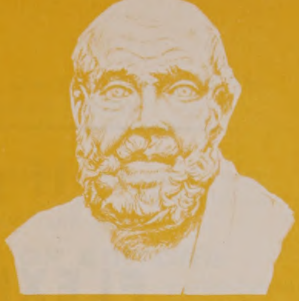
The Hampden Hippocrat



APRIL, 1968

ANNUAL MEETING ISSUE

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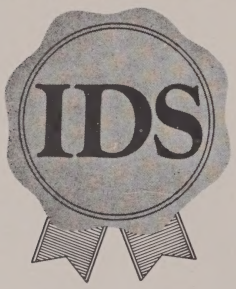

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The Hampden Hippocrat

Volume XXIV No. 4

A bulletin of The Hampden District of The Massachusetts Medical Society.

Founded in 1942 by Drs. Edward P. Bagg and William A. R. Chapin, and published monthly except July and August.

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EDITORIAL "Professional Citizenship"

As we approach another annual meeting of the HDMS and review what has gone on during the past year, do we have a feeling of satisfaction and complacency or do we feel that something is lacking? Or worse, do we have any feelings at all about our Society and its activities? It is highly doubtful that we are all satisfied and complacent. It is more likely that most of us are somewhat uneasy as we view developments in these critical years of social change. The role we physicians should be performing in terms of medical leadership seems to be usurped slowly by more aggressive, less qualified, but more organized "do-gooders". To curtail this takeover, we must not only do a better job but also make sure everybody knows we're doing it. Moreover, the best way of accomplishing this is through a strongly organized profession in the person of an alert enthused, informed, and active medical society.

There is probably no other profession that has as many simultaneous demands being made upon its interests and loyalties than the medical profession. By the same token, these demands tend to be divisive. Within a medical society's membership there are such divergent interests as between the general practitioner and the specialist; the city and country physician; the practitioner and the researcher or the administrator; one hospital affiliation and another; one specialty group as opposed to another; etc. Our common bond is our profession, and the instrument through which our profession can fill the role of physician to society as a whole is organized medicine—a unified medical society.

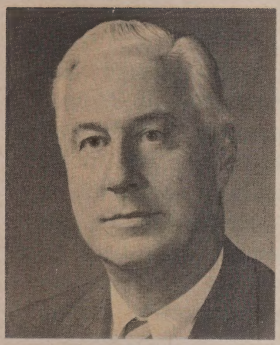
Without alert, articulate, and resourceful medical society members, the public's best interests may be downgraded by so-called "do-gooders", and the public resentment to the profession's alleged aloofness to the community's public and private health needs and civic responsibilities will continue to grow. But how is the membership to be substantially activated? Some basic energizers to be considered are: better orientation of new members; more emphasis on the young physician; follow-up studies on why members are not attending meetings; more interesting program content; analysis of objectives; continuing communication through various media and personal contact; special joint meetings with health and community groups; and more worthwhile, productive programs, engineered by committees to which the best men, selected for their talent and enthusiasm in a particular subject, are appointed.

It behooves each one of us to extend ourselves a little bit more in terms of energy and intellect to the unending tasks of our Society. If any one of us thinks that our Society is lacking or is failing us in some way, then have we each asked ourselves, "What have I done about it"? Have we informed ourselves about our Society's structure of committees, where every item of planning and business is thrashed out in discussion and formed for action? Have we offered ourselves for appointment to the committees where our special interest and abilities lie? Have we communicated our ideas and *constructive* criticisms to these committees, our officers, our councilors, and our legislators?

It has been said that many of medicine's problems can be mitigated by the "acceptance of professional citizenship." Moreover, professional citizenship reflects an old adage: "Coming together is a beginning, keeping together is progress, working together is success!"

John C. Ayres, M.D.

"THE EVER WHIRLING WHEELS OF CHANGE"



Epochal changes are taking place in the practice of medicine. In just one year, the Medicare and Medicaid laws have progressed from word to praxis. Their full impact on the practice of medicine have yet to be felt and evaluated. Significant changes have taken, are taking, and will take place in the Mass. Medical Society. In fact, a committee has been appointed by the latter's President to study and make recommendations relative to the future of this honorable Society. No doubt important changes will ensue therefrom. The Blue Shield has taken positive steps toward paying physicians on the basis of usual and customary fees. And so, change is in the wind, but what of its effect on the future?

George Meredith once said: "The wind that fills my sails propels; but I am helmsman." In the instance of the HDMS, our committees are the muscles of our helmsmanship. Our Society is always on the lookout for responsible members to carry our committee assignments. As a matter of fact, there is a general consensus amongst our officers that those who serve on committees and demonstrate their willingness to give of their time and effort to such important work should have prime consideration in being elected as councilors to the MMS. Serving on committees enables one to gain an insight into the affairs of our Society. Every year as the annual meeting draws near, a request appears in the *Hippocrat* solliciting members to volunteer their services on committees of their preference. In the past, the response has not been overwhelming. Fortunately many members have given and are devoting hours of their precious time in committee work. Much of this effort goes on unpublicized; it is of extreme value to the workings of the Society.

I take this opportunity to express my deep gratitude to all the members who have worked along with me. Moreover, I extend to the incoming President a sincerely fervent wish for a most fruitful and successful year.

Joseph M. Baker M.D.

Joseph M. Baker, M.D.

HDMS COMMITTEES ANNUAL REPORTS 1967–1968

BY-LAWS COMMITTEE

During the past year, two amendments to the By-Laws were adopted. These amendments, in accordance with the By-Laws, were published in the issue of the *Hippocrat* immediately preceding the September, 1967, meeting when they were acted upon by the Society.

Max Millman, M.D.
Chairman

ANNUAL REPORT OF THE SECRETARY

The tempo of activity at the Society's Headquarters has continued on the upgrade during this past year. Many requests for information on medical matters are handled daily by our office personnel. These questions are of an infinite variety, from "how long are polio shots good for?" to "where can my daughter find specific information on the subject of drug abuse for her college term paper?" All calls are handled promptly and efficiently.

The Annual Reports of the various committee chairmen will attest to the energetic activity of many of our busy committees.

During the past year there were eight deaths and two physicians dropped from the roles of the Society because of transfer. Twelve new members were received, and there are now 432 active and 74 senior members in the Society.

The problem of a communication gap between Society members and the Society Office continues to be a major one. Aside from personal contact between members, information regarding Society activities, both local and state, must be disseminated through our *Newsletter* and *The Hampden Hippocrat* or in special mailings. The limited staff at the 1414 State Street office makes it difficult to keep constantly in touch with the membership on all matters. Each member can help to overcome this problem by religiously attending each dinner meeting during the year.

This past year has seen further meetings between the representatives of the Welfare Department and the members of the Society, and it is hoped that this dialogue will be continued.

John F. Griffin, M.D.
Secretary

BOARD OF EDITORS THE HAMPDEN HIPPOCRAT

This report marks the 26th year of publication of *The Hampden Hippocrat.* In Sept. of 1967, a monumental change occurred wherein the bulletin was converted from the letterpress printing process to the offset process. The decision to change to offset printing was made with an eye to improving the bulletin through the use of more modern type faces, more illustrations, and more color. Moreover, it was hoped that the change would offer many new advantages conducive to attracting more advertisers.

In June of 1966, Dr. Roland F. Stebbins of Holyoke was appointed to the Board of Editors filling the vacancy brought about by the demise of Dr. Ralph Miller of Ware. In September of

THE ANNUAL MEETING OF

THE

HAMPDEN DISTRICT MEDICAL SOCIETY

TIME: TUESDAY, APRIL 23, 1968
Business meeting at 6:00 p.m. followed by
Social Hour at 7:00 p.m. and
*Dinner (Courtesy of Society) at 7:30 p.m.

PLACE: SHAKER FARMS
Westfield, Mass.

AGENDA: Annual Report of Officers and Committees
Election of Officers

YOUR PRESENCE IS URGENTLY REQUESTED

John F. Griffin M.D.

JOHN F. GRIFFIN, M.D.
Secretary

*If you must cancel your dinner reservation, please do so before noon on April 23, 1968.

1967, Dr. Richard J. Maher of Holyoke resigned from the Board thereby creating a vacancy which is yet to be filled.

The *Hippocrat* continued to appear monthly except for July and August. Most of the issues counted 32 pages. As per what appears to be developing into a tradition, the "special theme" motif characterized each issue. Some of such apparently well received "special theme" issues included Health Care Costs, Religion and Ethics, Public Relations, Hospital Construction, and Legislation. Again high praise and gratitude must be extended to the Society's various committee chairmen and their respective committee members who contributed excellent and informative items to the bulletin. As hoped for in the shift to the offset printing process, more sparkle was added to each issue by the use of color, modern face types and more illustrations. As a matter of fact, a new feature emerged in the form of a "picture story" as exemplified by the report on the "Fifth Annual HDMS Golf Tournament" in the September issue, "The Fifteenth Annual White Cap Ball" in the December issue, and the "Doctors and Their Dollies" in the March issue.

Financially, the *Hippocrat* had a gloomy red year. Reserves had to be tapped significantly to pay for publication costs. Although costs per se did not rise as drastically as seems to be the current universal style, receipts from advertising — the only source of income available to the *Hippocrat* — were down due to lack of advertising, particularly by national concerns. It has been suggested that national advertisers shun local medical society bulletins because not only is circulation limited but also because interest of the membership leaves something to be desired. In the instance of the *Hippocrat,* we know that our articles and advertising are read because of the comments of the membership. Moreover, not only do we offer an exclusive and interested audience to our advertisers but also easier, cheaper, and better visual methods of reaching this audience. Hence, we would remind the membership not only to patronize our advertisers — local and national — but also to put in a good word for the *Hippocrat* in each and every contact therewith.

We would also urge each member to share his or her ideas and views with us. The pages of the *Hippocrat* are available for use as a "sounding board," particularly in the form of items of correspondence from the membership; therefore, send us your ideas, views, suggestions, questions, and even criticisms and complaints.

Indebtedness and gratitude to many people for their assistance and cooperation is both a way of life and encouragement to the Board. It would be impossible to extend thanks to each individually; however, we must single out especially the following: Mrs. Alicia Willard, Advertising Director of the *Hippocrat,* Mrs. Vivian Purdy, the Society's Executive Secretary, Mrs. Lorraine Greenspan, the Auxiliary's correspondent to the *Hippocrat,* and our printer — The Burt Printing Co.

John C. Ayres, M.D.
Chairman

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Meprobamate: Drowsiness may occur and can be associated with ataxia; the symptom can usually be controlled by decreasing the dose, or by concomitant administration of central stimulants. Allergic or idiosyncratic reactions: maculopapular rash, acute nonthrombocytopenic purpura with petechiae, ecchymoses, peripheral edema and fever, transient leukopenia. A case of fatal bullous dermatitis, following administration of meprobamate and prednisolone, has been reported. Hypersensitivity has produced fever, fainting spells, angioneurotic edema, bronchial spasms, hypotensive crises (1 fatal case), anuria, stomatitis, proctitis (1 case), anaphylaxis, agranulocytosis and thrombocytopenic purpura, and a fatal instance of aplastic anemia, but only when other drugs known to elicit these conditions were given concomitantly. Fast EEG activity, usually after excessive dosage. Impairment of visual accommodation. Massive overdosage may produce drowsiness, lethargy, stupor, ataxia, coma, shock, vasomotor and respiratory collapse.

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INSURANCE, LABOR RELATIONS, AND INDUSTRIAL ACCIDENT COMMITTEE

On January 30, 1968, the members of the Insurance, Labor Relations, and Industrial Accident Committee of HDMS met with the members of the Health Insurance Council. Those present were: Mr. Tesoro, Mr. Gardner, Mr. Edwards, and Mr. Premo. Physicians from the Committee were Drs. Black, Tapp, Kelly and Berkowitz. Mrs. Purdy and Dr. Moore were also present. Questions previously submitted by physicians were referred to the representatives of the Health Insurance Council.

1. Uniform insurance forms were proposed by the doctors as being easier and more efficient for their secretarial staffs. The HIC has a form which was developed by the AMA and the Council. It is hoped that the major insurance companies will adopt this form.

2. Now that Blue Shield and Medicare are paying on a "going rate" basis, what do the commercial insurance companies plan to do? It was explained that benefits paid out reflect insurance premiums. Unions' group insurance premiums would have to be increased if the "going rate" were to be paid.

3. Insurance coverage for a physician's office staff is now available under a plan offered for medical assistants and is available through the Lester Burdick Company. This coverage is relatively inexpensive.

4. The members of the HIC feel that Blue Cross and Medicare have preferential treatment as far as the hospitals are concerned. This results in the uninsured patient being taxed for Medicare and usually paying higher hospital fees, which is a form of discrimination.

5. Dual insurance coverage is now being pro-rated in most instances to keep premiums at a reasonable rate.

6. A county-wide malpractice insurance coverage plan, we were told, is now under consideration by the Members' Insurance Committee.

7. Finally, the question of excessive fees arose. The HIC members stated that in five years there were 365 claims which they felt were excessive. This is not an alarming number, but it behooves all of us to remember to keep our fees within the limits of the unit value system.

On March 5, 1968, our Committee met with members of the Central Labor Union. Those present included: Mr. Creanza, Chairman and representing the Carpenters', Mr. Rutherford representing the Laborers' and Mrs. Powers of the Teamsters' Union. Numerous potential problems were discussed.

1. Assignments of insurance benefits are welcomed by the union representatives. They suggest that on the face of the bill a rubber stamp or typewritten authorization be used. This should read: "I hereby authorize direct

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payment to Dr. —— for the services described above." This should be signed by each insured member. Union representatives also stated they would like the amount of the bill written out or put on the bill with a checkwriter.

2. Unions now tend to try to obtain contracts for two to five years, but they find it difficult to predict hospital and medical costs over that period of time. In order to arrive at a fair insurance contribution from the employer, they would like to have the medical association and the hospital association reach an agreement whereby fees would not be increased by more than *X* per cent over a definite period of time. As an illustration, the doctors' relative value fee scale would not be increased, let us say, more than 1½ to 2 per cent over a two, three or five year period. The unions would also like to have the hospitals arrive at a similar percentage. These figures are to be presented to unions and employers as guide lines.

3. In uncomplicated surgical cases, the question was asked: "Is it fair to expect a bill from the surgeon and the medical attending for daily visits?" it was felt that this query should be referred to the Grievance Committee.

4. A question relating to use of non-union laborers, which has been brought up in the past, was introduced again this year. Nursing homes and medical buildings have been built with non-union labor by non-union employers. The union representatives and their members feel that since they represent some sixty thousand of our patients and pay medical and hospital bills of two to two and a half million dollars a year, it is only fair that their constituents should be considered when bids are let out for buildings of this type. The Comittee agreed to bring this matter to the attention of the Society.

The members of the HDMS Insurance, Labor Relations, and Industrial Accident Committee and the insurance and labor representatives all agreed that both meetings were informative and valuable.

M. Gene Black, M.D.
Chairman

MALPRACTICE AND MEDICO-LEGAL AFFAIRS COMMITTEE

This Committee had no matters presented for its consideration during the past year. Accordingly, no meetings were held.

A. A. Bloniarz, M.D.
Chairman

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SCHOLARSHIP COMMITTEE

During the year 1967 the Committee received twenty-six completed applications from students accepted for admission or enrolled in schools of nursing, pharmacy, and medicine. This year, two pharmacy students merited a scholarship award but were later able to carry on their education plans with the help of financial assistance from other sources. Our final awards went to two medical students with good records, already enrolled in the second and third years of medical schools, and to a first-year nursing school student: Paul C. Salmonsen at the Baylor University School of Medicine; Normand F. Tremblay at the University of Vermont College of Medicine; and Margaret J. Gauthier who is entering the Cooley Dickinson School of Nursing in Northampton. Since both medical students received our grants last year, and their need for financial support in both cases was even greater this year, it was the unanimous opinion of the Committee that we should continue to help these boys who have already shown excellent promise and continue to need financial assistance. We have received letters of appreciation from all three of these students and personal visits from our two young doctors.

Our work in selecting students who are to receive these scholarships will suffer from the loss, through unexpected death, of Doctor Victor Grover, whose experience and knowledge in this area contributed greatly to final decisions we had to make in the face of the obvious need of all applicants concerned.

A total of $1,067.82 was distributed as scholarship grants. This is the total income realized from the Society's fund of $22,969.01, which is invested as a separate fund under the supervision of the Treasurer of the Massachusetts Medical Society and of the Board of Directors of the Charitable and Educational Fund of the Massachusetts Medical Society.

At the time of this report we have received six scholarship applications for 1968. The Committee hopes that all Society members realize the opportunity which we have in these scholarships to interest future physicians, nurses, and pharmacists to return to this area to practice.

B. Lincoln Wales, Jr., M.D.
Chairman

ADVISORY COMMITTEE ON UTILIZATION COMMITTEE

I dutifully sent in a report last year which was ignored. Why bother to solicit another this year?

No questions or agenda have been submitted to this Committee this year and the Committee has therefore had no meetings.

Allen S. Johnson
Chairman

EXECUTIVE AND GRIEVANCE COMMITTEE

The members of the Executive Committee met monthly during the past year, with the exception of December. Attendance at the meetings was unusually good and all contributed in a cooperative manner to expediting the work of the Committee.

The highlights of the Executive Committee's meetings continue to be published in *The Hampden Hippocrat.*

During the past year, twenty-three complaints were reviewed by the Grievance Committee and a satisfactory solution was reached in each case. Most complaints were regarding fees and filling out of insurance forms.

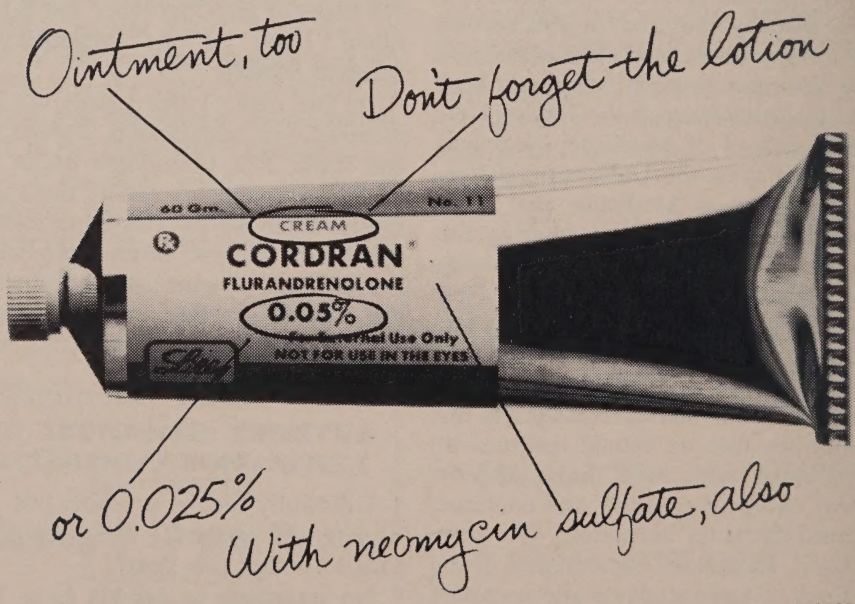
John F. Griffin, M.D.
Secretary

PUBLIC RELATIONS COMMITTEE

The Public Relations Committee has had a busy year dealing with new problems facing the physician. Medicare, Medicaid, Congressional drug investigation, etc. have brought us into the limelight repeatedly. The public media have appreciated the cooperative attitude of the Hampden District Medical Society and its P. R. Committee. A new inovation, "HELP DOC", in the Daily News was attempted and had a brief flurry of interest. However, questions from the public were too involved and unfortunately did not maintain reader interest.

The Chairman wishes to thank all the members of the P. R. Committee for their support during the past year.

Bernard Bloom, M.D.
Chairman



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BLUE SHIELD COMMITTEE

Activities of the Blue Shield Committee during the past year have consisted of a series of meetings held in Boston at the Blue Shield Headquarters and an informational conference held in New Hampshire in September.

A number of issues involving individual physicians has been completed quite satisfactorily with the cooperation of the Blue Shield office.

The chief issue of the year involved a change in the method of payment to physician from the previous fee schedule to 95% of "usual and customary" charges. The physician is being requested to absorb the other 5% chiefly in exchange for reasonable and expeditious payment.

There appears to be quite clearly a suggestion of built in, possibly preplanned confusion to the whole matter.

Each physician by means of computer generates his own fee schedule and has been doing so for the past year. Each of us by the figures we have been putting on Blue Shield forms have informed the computer of our own "usual and customary" charges. It will be difficult to take issue with any fee schedule we have generated ourselves individually.

It is also clear that each community and specialty has been generating similar, broader, geographical, and specialized schedules which become collectively "usual and customary" charges.

We are now faced with a myriad of programs all of which are gradually leaning toward the self-generated "usual and customary" charge concept. Catalyzed with a little confusion and a little time these multiple programs have a clear tendency towards merger and standardization. We are ultimately headed toward plan "X" which will probably consist of a standardized program for everybody and everything based upon our own self generated charges. Is this good?

Walter D. Carver, M.D.
Chairman

WOMAN'S AUXILIARY COMMITTEE

The Woman's Auxiliary this year has stressed two main projects. First, the organization has taken on the task of interesting young people in careers in health. Through its organization, films have been shown; written material, distributed; and speakers have sought to recruit young people. This fine program of recruitment is a continuous one and certainly one from which the entire community will reap benefits for years to come.

Secondly, the Auxiliary has concerned itself with nursing scholarships. During the past year ten young ladies have been given financial aid. The total amount being in the neighborhood of two thousand dollars. The main source of income for this project is the *White Cap Ball.*

So once again the Society is indebted to its Auxiliary. Perhaps, it should be said that behind every great society is a woman's auxiliary!

Thank you ladies, you are doing a wonderful job.

Carlo Montori, M.D.
Chairman

THE RESPONSIBILITY
OF THE SCHOOLS
IN SEX EDUCATION

THE DRUG PROBLEM
IN SCHOOLS —
WHAT TO DO ABOUT IT

MASSACHUSETTS CONFERENCE
ON
SCHOOL HEALTH

SOMERSET HOTEL, BOSTON
WEDNESDAY, APRIL 24, 1968

Sponsored by the
Committee on School Health
Massachusetts Medical Society

MENTAL HEALTH COMMITTEE

Regular monthly meetings of the Mental Health Committee were held.

The Chairman of the Committee was appointed to be a member of the local Area Mental Health Board by the Governor under the new Mental Health and Retardation Law.

The Hampden District Mental Health Committee was accepted by the Area Board as its Medical Advisory Committee.

At its January meeting, Dr. Harrington presented to the Area Mental Health Board a progress report from the Mental Health Center Medical Advisory Committee. Dr. Shuman and Dr. Boss are scheduled to make a similar report on the proposed Regional Retarded Center at the March meeting.

The Committee co-sponsored a symposium on alcoholism at the Municipal Hospital in conjunction with the Public Health Committee on Jan. 23, 1968.

Eugene Boss, Jr.
Chairman

EMERGENCY MEDICAL SERVICE COMMITTEE

Although the total number of calls received by the physician covering the Emergency Medical Service probably averages less than one per day, the answering service handles many more calls than this on an average day. It is the feeling of the Committee that because of this, the Emergency roster should be continued despite the fact that it is being used less and less.

Harold Williams, M.D.
Chairman

PUBLIC HEALTH COMMITTEE

During the past year the Public Health Committee has been actively engaged in extension of current projects. The "Sex Education Program" has continued at an even greater pace with our films being seen and our speakers being heard by church groups, civic organizations, and PTA's on the average of 3-4 times a week. The increased public awareness and effectiveness of the program is made tangible with the introduction of "Family Living" curricula into the Springfield School System next fall and into several suburban systems. All the physicians who have participated are to be congratulated, for without them this would have not occurred.

There has been further involvement with the Springfield School Department in two other areas. Our advisory services continue through the Office of Psychological Testing and Dr. Walter English. This program has had a slow start with only 10-19 children being referred in the past year. The development of a Disability Reading Center is being considered by the School Department under the direction of Miss Gott and Dr. Olive Niles, who sought and were given guidance in the medical aspects of the program.

For over a year this Committee has been discussing the feasibility of a Health Fair sponsored by HDMS. This is to be discussed by the Executive Committee and plans are being made for March, 1969. It is hoped there will be a large personal involvement from each member of this Society.

Robert A. Sears, M.D.
Chairman

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LEGISLATIVE COMMITTEE

The March issue of *The Hampden Hippocrat* gives all the details of this Committee. No meetings were held locally during this year.

Karel J. Susat, M.D.
Chairman

MEMBERS' INSURANCE PROGRAMS COMMITTEE

During the past year the Members' Insurance Committee had studied and approved a personal catastrophe policy, sometimes known as "an umbrella policy", for members of the Hampden District Medical Society. This type of Policy covers a wide range of items including malpractice insurance, which is to be super-imposed on the basic policies which all members would normally have but which would add up to 1 million dollars or more. The policy is underwritten by the Insurance Company of North America. A recommendation had been sent to the Executive Committee and has been approved by same. The membership will be solicited for this new type of coverage.

In the meantime we continue to sponsor a group health and accident insurance policy administered by the Burdick Company, and also group life insurance and business overhead insurance. The latter two are administered by the Lessere-Wertheim Company.

The Committee makes every effort to provide for the membership insurance programs which would be advantageous on a group basis, and the most important types of insurance coverage are now available to the membership.

H. Bernard Tillman, M.D.
Chairman

MEDICO-RELIGIOUS COMMITTEE

The Medico-Religious Committee of the HDMS has held regular meetings throughout the year in a continued effort to utilize the combined talents of both clergy and physicians for better patient care.

During the year one new member, Rev. Paul Zeckhausen, Jr. minister of the Wilbraham United Church has been added to the Committee.

In November, the Chairman, at the direction of the Medico - Religious Committee, appeared before the Executive Committee of the HDMS to present a plan for a pilot study employing the principle of combined hospital rounds to be carried out by members of the Medico-Religious Committee accompanied by clergymen on the Committee. Permission was granted by the Executive Committee for such a study and plans are underway at present to implement it.

Our Committee will be represented at a workshop session to be held in Auburn, Mass., on Wednesday, April 3, under the direction of the state Medico-Religious Committee Chairman, Dr. Garry Hough, III, at which time it is our hope to obtain further directions and plans for the ensuing year.

Leroy J. Kendrew, M.D.
Chairman

DISASTER MEDICAL CARE COMMITTEE

This committee had no meetings this year. No important changes or problems were brought to the attention of this committee during this current year.

William J. Cummings, M.D.
Chairman

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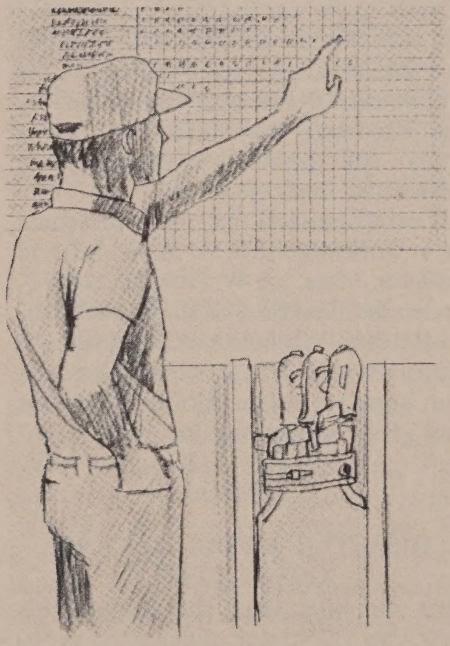
HDMS ANNUAL MEETING, APRIL 23
HDMS Executive Committee Meetings, May 14 and June 11
MMS Council Meeting, Boston, May 20
MMS Annual Meeting, Boston, May 21-23
MMS Annual Meeting of the Fellows, Boston, May 22
American Psychoanalytical Society, Boston, May 10-13
American Psychiatric Society, Boston, May 13-16
American College of Chest Physicians, San Francisco, June 13-17
AMA Annual Meeting, San Francisco, June 16-20



THE SIXTH ANNUAL HDMS GOLF TOURNAMENT

will take place on
WEDNESDAY, MAY 22, 1968
at the
ELMCREST COUNTRY CLUB
EAST LONGMEADOW

Registration from 12:30 P. M — 1:00 P. M.
Cost: $14.00 for Dinner, Green Fees, Prizes, etc.

(Make checks payable to HDMS specifying Golf Day and send to Headquarters, attention of Mrs. Purdy.)

Harry L. Roberts

HARRY L. ROBERTS, M.D.
Chairman

PARTICIPATE!

In comparison with district or county societies throughout the country, the Hampden District Medical Society has a good record of attendance at meetings. Many societies run as low as 10-15% attendance while attendance at our meetings may be 40-50%. It is gratifying to find ourselves in such a position. But even at the 50% figure, where is the other half of our membership? Of the 50% who attend a meeting, how many have thoughtful, constructive comments to make about the issues at hand? Of those who have complaints and gripes about how things are going, how many have taken the time and effort to serve on committees where problems can be thrashed out and solved in a statesmanlike manner?

I ask these questions at this time when our annual meeting is about to take place and a new president is about to set up the many committees that will work long hours to make our Society a live one. *The Hippocrat* has carried lately a request for those who would like to work on a committee to please raise their hands. I do not know what sort of response Dr. Barnes has had, but I do know that, when I was President-Elect, we had 5-6 volunteers out of a membership of approximately 500. To be sure, those who were asked to serve by and large accepted the responsibility and those who accepted, worked faithfully. But there must be more than a handful of men — particularly the younger men — who realize the importance of and the need for an interest in organized medicine.

This decade has seen changes in our political structure and our socio-economic position that is worrisome to many of us. Only through unified and organized effort can these changes be prevented from becoming more and more onerous. The only possible way that this unification and oganization can be accomplished is for each individual physician to do his part..

We hear from all sides criticism of how the District Society is run, how the State Society is a do nothing organization that is run by a clique, and how the AMA is always against things and never for anything. Physicians even resign from the AMA on the basis that they don't like the way things are being done. If such membership consisted in being a silent dues paying member only, then perhaps resignation is the only way out. But would it not be much more in keeping with intelligent understanding to get into the fray and try to do something about what

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does not appeal? Actually, of course, the general criticism of the structure of organized medicine as outlined above is far from correct and is usually based on ignorance. This is true of most generalizations.

How many members have discussed problems with their councilors? How many members have attended a State Society meeting? How many have been to an AMA meeting and attended a meeting of the House of Delegates? How many have spoken before a Reference Committee of the House of Delegates? These are the places in which it is important to speak one's piece, and I am sure would be much more productive of results than picking up your bat and ball and going home to sulk. It is also a much better place in which to sound off than the staff room, the coffee shop or at the scrub sink.

By no means do I imply that organized medicine is perfect. The very nature of its democratic structure leads to imperfections. But I do mean that the individual physician is not going to prevent changes that may be most significant nor is the individual physician going to implement changes of importance. This must be done by organized medicine, and by organized medicine I mean all the specialty societies as well as the AMA. It is significant to note that the Trustees of the AMA and the Board of Regents of the American College of Surgeons have had meetings with this idea of eliminating fragmentation in mind.

Let me urge every young physician to join his medical specialty society, his district and state society, and the AMA but more important, let me urge him to participate. Webster defines participate as "to have a share in common with others; partake; share." In this way we can share the fruits of accomplishment rather than the sour dregs of defeat.

I can assure you all that any president, any nominating committee, and any committee chairman would love to be besieged by volunteers. If we as physicians do not do the job that is before us, you can rest assured it will be done from the home office and probably not on our terms.

So raise your hand and participate.

Hayes

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SPRINGFIELD ACADEMY OF MEDICINE

presents a

SYMPOSIUM*

on

FLUIDS and ELECTROLYTES

SATURDAY, APRIL 20, 1968

SPEAKERS and TOPICS:

"PARENTERAL FLUIDS IN CHILDREN"

C. Harrison Snyder, M.D.
Ochsner Clinic, New Orleans

"PARENTERAL FLUIDS IN ADULTS"

Robert G. Muth, M.D.
Associate Professor of Medicine
Director Renal Division
Kansas City General Hospital

"NEW TOOLS IN TREATMENT OF SHOCK"

L.R.N. Del Guercio, M.D.
Department of Surgery, Albert Einstein College

"DISORDERS OF FLUIDS AND ELECTROLYTES"

Louis G. Welt, M.D.
Department of Medicine, University of No. Carolina

PLACE: White House Inn, Chicopee
(Exit 6, Mass. Turnpike)

TIME: Registration at 9:30 A. M.
Luncheon at 12:00 Noon
Reception after close of program

LADIES INVITED: Special program featuring international dance and dress in A. M. with a fashion show in the P. M.

RESERVATIONS: Contact the Academy's offices at 1400 State Street, Springfield. Telephone Number 734-5445.

* This symposium is made possible by the cooperation and assistance of Lerderle Laboratories of Pearl River, New York.

IN DEFENCE OF GRASS ROOTS

"The Committee believes that there has been a decline in the influence, prestige and effectiveness of the average local county medical society as a unit of medical organization. This situation has come about largely within the past two decades."

"Probably the most easily documented proof of the foregoing statement can be found in the low and declining percentage of membership attendance at meetings of local groups. The failure to attend meetings on the part of members may well be due to many factors of varying weight."

—(From report of AMA's Board of Trustees, September-November, 1967)

It is extremely difficult to equate the above AMA statements with our local experience. Anyone old enough to remember needs hardly be reminded of the relative lethargy that prevailed in this area about three decades ago. Compared with the 1930's and 1940's, Hampden District has become of late a veritable beehive of buzzing activity. This is true even if we employ meeting-attendance (as implied in the AMA report) as the sole yardstick of membership interest and participation. Our current rate of 40% attendance may not be the highest in the land, but it is nevertheless quite high when compared with the pre-World War II era.

COMMITTEE PARTICIPATION

But is meeting attendance the only true and valid criterion of effectiveness? Only a minor fraction of their total membership attends the business meetings of the AMA and the MMS. Does this in any way diminish or nullify the influence of our prestigious parent organizations? Almost as important as meeting attendance is committee participation. Here then is another important yardstick of society influence and effectiveness. Committees, as is well known, can either make or break a society. In this direction Hampden District has been most fortunate. Not only is our list of committees very impressive, but also more of our members are involved today in meaningful committee work than ever before.

However, the most tell-tale proof of the effectiveness of any district society is its accomplishments. During the last 25 years or so, no less than four Hampdenites served as presidents of the MMS while a similar number served as delegates or alternates to the AMA's Housee of Delegates. In the last ten years alone more significant projects and programs were sponsored by Hampden than during practically all of its preceding history. (See "A Decade of Progress," page 22).

WANTED: MORE DISTRICT BULLETINS

How, then, are we to explain the discrepancy between the AMA report and our own situation? Are we to surmise that Hampden is the solitary or rare exception? If so, why? The best explanation (and remedy) thus far offered is that of Dr. Edward P. Bagg, who as far back as 1940 suggested that what organized medicine needed most was meaningful communication

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at the district or grass roots level. It was this conviction that prompted him and the late Dr. W. A. R. Chapin to establish *The Hampden Hippocrat* in 1942. Since then, and especially since 1957, when it became a monthly publication, our leadership has come to realize more and more that much of Hampden's recent success is due to the many services rendered by its bulletin. What are some of these services? (1) It keeps the membership informed; (2) it stimulates interest in Society affairs; (3) it encourages meeting attendance and committee participation; (4) it improves internal relations; (5) it affords the members an opportunity to express their views, opinions and ideas; (6) it chronicles significant events; and finally (7) it forms yet another link of communication between Hampden and its parent organizations. Copies of our bulletin are mailed regularly to 22 The Fenway, Boston and to the AMA in Chicago.

In view of our own experience it is noteworthy that of the 31 MMS district societies not more than two or three publish monthly bulletins. The figures nationwide are probably no better. Given the motivation and guidance, many others might join, or at least try to join, the ranks of bulletin publishers.

In an editorial on the AMA report, referred to above, The AMA NEWS (January 29, 1968), commented in part as follows: "The county medical society is a vital part of organized medicine. Upon the county society's members falls much of the work of, and from them should come many of the ideas and enthusiasm for organized medicine's programs." In his address before our Society on December 6, 1966, Dr. Blasingame, Executive Vice President of the AMA stated: "We need your ideas, your informed criticism, your aspirations, and your understanding. If you want to bring an important matter to the attention of the Board of Trustees, do so through my office or through your delegation to the House of Delegatse."

Responding to these suggestions, we venture to offer:

(1) That the AMA, in addition to meeting attendance, establish other criteria for gauging the effectiveness of county or district societies.

(2) That the AMA assist and guide local societies in the publication and financing of medical bulletins. An appropriate brochure might prove very helpful.

(3) That communication between local societies and their parent organization be improved in as many other ways as possible (see "Room at the Top" *Hippocrat,* May, 1967).

Millman

THE MEDICAL CREDITS DIVISION

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A DECADE OF PROGRESS

Compiled by VIVIAN M. PURDY
Executive Secretary, HDMS

YEAR	
1957	Public Health forums (8 over a period of 2 years), completed.
1957	*The Hampden Hippocrat* (established as a quarterly in 1942), becomes a monthly bulletin.
1958	Rehabilitation Committee appointed.
1958	Medico-Legal Code formulated jointly with Bar Association.
1959	Special meeting to consider recommendations of Committee on Insurance. Labor Relations and Industrial Accidents, is held.
1960	Indoctrination Programs for new members, annually.
1960	Diabetes Detection Week, annually.
1961	Speaker Bureau established.
1961	Medical Society Headquarters established.
1961	Full time Executive Secretary employed.
1961	Medio-Religious Committee established.
1961	Member of Chamber of Commerce of Greater Springfield.
1961	Community Health Week, annually.
1962	HDMS Golf Day, annually.
1962	Seat belt drive with Western Mass. Safety Council.
1962	Mock trial with Bar Association.
1962	Series of newspaper articles.
1963	Polio immunization program.
1963	Scholarship fund from proceeds of polio program.
1963-1965	PR and news media conferences.
1963	Medicare symposium.
1963	Instruments collected for USS Springfield.
1965-1966	Sports Injury Program.
1965	Speech training courses for physicians.
1966	Hampden Alert, 1966-disaster program.
1966	Auto Accident Prevention Program for public.
1966	VD Program for public.
1967	Anti-Smoking Program for public.
1967	Emergency Care & Transportation of Injured.
1967	Dinner with Bar Association.
1968	Alcoholism program for physicians & para-medical personnel. Currently planning Health Fair for 1969 to include all health agencies.

THE NEW "UMBRELLA" POLICY

Recently made available to members of HDMS is a new group personal professional catastrophe policy, sometimes called an "umbrella" policy. This plan is presented by the Members' Insurance Committee in order to provide maximum liability protection at minimum cost by buying insurance on a group basis, which is the function of this Committee.

It has become increasingly evident that the basic liability insurance which is customarily carried is frequently inadequate. The present plan is to provide protection up to $1,000,000 by adding this "umbrella" policy to the basic policies already carried. The cost is low because the protection is over and above the existing automobile, personal liability, and mal-practice insurance, but in addition, this coverage includes other areas not normally insured, subject to a deductible of $250.00. The new policy starts where the regular insurance stops.

Certain minimum amounts of basic insurance are required. Comprehensive personal liability coverage or the liability coverage under a homeowners policy must be $50,000.00. Automobile liability must be $100,000/-$300,000 for bodily injury and $10,-000 for property damage. Professional liability must be $100,000/$300,000. Other minimum requirements are needed for those owning boats or aircraft and for employer's liability. Most of us already have these required coverages. Certain other areas where we are not already covered, such as for libel, slander, false arrest, etc. insurance is covered up to $1,000,000 without any basic requirements but subject to a $250.00 deductible.

Of great interest to physicians is the professional liability coverage which provides a total limit of $1,000,000 for all damages per policy year. For other claims, the limit is $1,000,000 per occurrence. Higher limits in multiples of $1,000,000 are available up to $10,000,000. Also of great interest is the legal defense coverage from the first dollar if such coverage is not provided by the basic policy.

Costwise, we stand to gain by buying on a group basis, provided 5 or more physicians participate. A 15% dividend is to be paid out of profits, which lowers the cost below that which would prevail under an individual policy.

The Members' Insurance Committee recommends this coverage to the membership. The policy is underwritten by the Pacific Employers Insurance Company, a subsidiary of The Insurance Company of North America. Locally the program is to be administered by Field, Eddy, and Bulkley.

Questions and applications should be addressed to them.

Tillman

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EXECUTIVE COMMITTEE MEETING (Highlights)

The Executive Committee met on Tuesday, March 19, 1968 in the conference room of the HDMS. Present were: Drs. Baker, Griffin, Stoler, Moore, Hayes, Bloom, Nero, Hough, Mozden, and Mrs. Purdy.

The meeting was called to order at 8:04 P.M. by Dr. Baker.

Dr. Ayres discussed with the Committee some of the needs of *The Hampden Hippocrat* regarding the Executive Committee Meeting highlights which appear monthly in that publication.

Dr. Johnson spoke before the Executive Committee regarding some problems that have developed at the Holyoke Soldiers' Home in obtaining adequate professional help. The Executive Committee will meet with the Trustees of the Holyoke Soldiers' Home in the near future to attempt to assist them with this problem.

Dr. Sears appeared before the Committee to discuss the Health Fair which

The Annual Meeting of the
SPRINGFIELD ACADEMY OF MEDICINE
will be held on
TUESDAY, MAY 14, 8:30 P. M.

AGENDA:	Business Meeting Election of Officers
SPEAKER:	ATTORNEY LYMAN BURGESS Springfield
TOPIC:	"ESTATE PLANNING"
PLACE:	Auditorium, Municipal Hospital Springfield

is being planned for March of 1969.

Following this the minutes of the previous Executive Committee were read and approved as read.

Dr. Thomas Reilly's letter of resignation from the Council and the Public Health Committee was read and accepted with regrets.

Two letters from the American Medical Association were read to the Committee. They concerned the planning of a "free exchange" get together by the members of a county medical society in the next six months. It is hoped that by encouraging many members of the society to speak up on matters which are pertinent to the medical profession, a wealth of new ideas will be received and put to use in the medical society.

The Executive Committee expects to announce this at the HDMS annual meeting and to make final plans for same, sometime in the fall.

A letter was read from the Massachusetts Medical Benevolent Society encouraging members to join this Society. Contribution to this Society for annual membership is $5.00. Members will be urged to become cognizant of this organization when this letter is read at the annual meeting.

An informal letter was received from Dr. Black encouraging a summary of rules from the Board of Registration in Nursing and was filed as informational.

An expression of thanks to Dr. Parenteau was given by the Committee and will be sent to him. Letters received from Dr. Boss and Dr. Williams regarding a request by Dr. Larson were read. The consensus of the Executive Committee was that Dr. Boss's suggestion be followed for the time being.

It was voted to discontinue the Aesculapian Award to the Springfield Art League.

It was voted to communicate with Dr. Naumoff regarding the training of clinical clerks.

Dr. Williams, Chairman of the Emergency Medical Service, was given approval to begin the placing of names back on the roster that have previously been discontinued because of medical reasons. This will be done in accordance with the physician's current physical well being.

It was reaffirmed by the Executive Committee that all annual committee reports will be first approved by the Executive Committee before being published in *The Hampden Hippocrat.* The Editor of *The Hippocrat* is to be reminded concerning this mode of operation.

The financial report of *The Hampden Hippocrat* was approved as submitted.

There was a lengthy discussion regarding the possible holding of a Health Fair in the Springfield area in 1969. Further discussion on this matter will be continued by the Public Health Committee and representatives of the Woman's Auxiliary together with other agencies in and about the Springfield area.

The Executive Committee was adjourned at 10:20 P.M.

The Grievance Committee then met and heard two cases.

The Grievance Committee adjourned at 10:40 P.M.

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HAMPDEN CAPSULES

SPEAKERS

Drs. Sears, Sinish, Mozden, Hubbard, Hill, and Doe spoke at a "Fit to be Tied" program at Feeding Hills Congregational Church. A similar program will be held at Park Memorial Baptist Church with some of the above physicians participating plus Dr. Zadworny.

Dr. Zadworny spoke at Blue Berry Hills School and at Sam Bowles School as well as St. Mary's Church on "Family Living."

Dr. Levin-Epstein spoke and showed the movies "Human Growth" and "Quarter Million Teen-agers" in Holyoke.

Dr. Stebbins spoke to the Sisters at Mount Marie.

Dr. Hall of Holyoke was the chairman of a program sponsored by the Western Chapter of Massachusetts Heart Association.

Dr. Kendrew spoke at St. Cecilia's in Wilbraham on "Drugs."

Dr. Carpenter spoke to an organization of police wives on "Cancer in Women."

Dr. Brady spoke to the Szetela PTA in Chicopee on "What to Expect of Children from Kindergarten through the Sixth Grade."

Dr. Black spoke to a class at Western N. E. College on "Drugs and Drug Addiction."

Dr. Shammash and Wiedman instructed nurses on cardiopulmonary resuscitation at the Mercy Hospital.

PERSONALS

Dr. Zacarian has been elected as a Fellow of the American College of Physicians. In January, Dr. Zacarian read a paper on "Cancer of the Eyelids" to the second annual meeting of the Society of Cryophthalmology in Miami, Florida.

Dr. Pahl has been certified by the American Board of Obstetrics and Gynecology.

Dr. Polchlopek has been elected to associate membership in the American College of Physicians.

Dr. William Davis attended the annual meeting of the American Society of Hematology in Toronto, Canada.

Dr. Simpson and Dr. Kinsella had an article printed in the November 27th issue of the Journal of the American Medical Association.

Dr. Adham was elected and appointed a member of the legislature of the American College of Surgeons.

Dr. Thomas McCarthy has been elected a Fellow of the Boston Obstetrical Society.

Dr. Griffin, Secretary of HDMS, spoke at the MMS Conference for Presidents and Secretaries on "A District Grievance Committee and its Problems."

Brian P. Moore, son of Dr. Paul T. Moore, HDMS Treasurer, has been awarded an International Fellowship by the Association of American Medical Colleges. Brian is currently a fourth year medical student at the University of Wisconsin Medical School and will spend the time on this Fellowship from February 10 - April 20 at the Medical School of the University of Tel-Aviv and the Tel-Hashomer Government Hospital in Tel-Aviv, Israel.

Please, cooperate! In the March 25th issue of *The AMA News* there is a physician activity verification questionnaire. Please, complete and return to the AMA!

187th ANNUAL MEETING

MASS. MEDICAL SOCIETY

TIME: Tuesday, Wednesday, Thursday
May 21, 22, and 23

PLACE: Statler Hilton Hotel
Boston

AGENDA: SYMPOSIUM
Lectures and Films
Panels
Section Luncheons
Scientific Exhibits
Technical Exhibits
Golf Tournament
Shattuck Lecture
Art Exhibit

ANNUAL DINNER: Wednesday, May 22, 7:00 P. M.

ANNUAL MEETING OF FELLOWS
Wednesday, May 22, 2:00 P. M.

ATTENTION COUNCILORS!

The Annual Meeting of the Council will be held on Monday, May 20 at 10:00 A. M.

CORRESPONDENCE

RE. "ANOTHER BATCH"

To the Editor:

In the March issue of the *Hippocrat,* the Legislative Councilor gives his annual report and lists important bills of pending legislation. In his preface to this listing, he editorializes on the problems of private practice, the rising costs of medical care, and alludes to hospital over-utilization. In addition, he makes the statement: "I should hope that we learned something from our past mistakes, when organized medicine did virtually nothing to actively inform and educate public opinion on the problem and issues, while the public was willing to listen."

I would like to comment on two of the statements made. First, if there is hospital over-utilization, there is no one to blame but the physician. It is the doctor who admits the patient to the hospital, and no one but the physician is responsible for this admission.

Second, in reference to the quotation above, this is, of course, a misstatement of fact. Organized medicine spent vast sums of money and untold hours of volunteer man power in explaining to the public the very things that have now come to pass. The fact that the public is loathe to turn down something "free" and the fact that the election of 1964 seemed to indicate a mandate for the "Great Society" should in no way mitigate the efforts of organized medicine to "actually inform and educate public opinion." Failure to accomplish one's mission by no means presumes lack of effort.

To make such a statement as is quoted from page four of the March *Hippocrat,* the writer must have spent considerable time away from his radio and his television and must have avoided all reference to newspapers and magazines which so carefully reported the battle between organized medicine and the proponents of P.L. 89 - 97.

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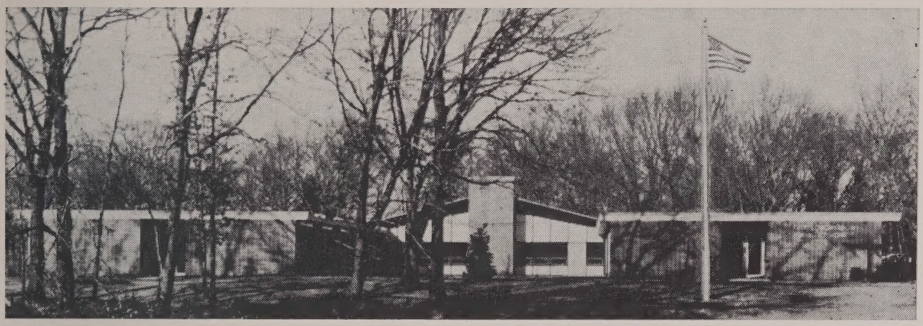

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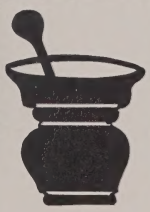

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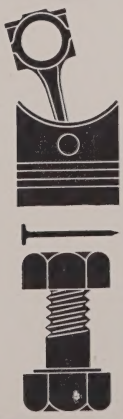

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